State of West Virginia AUTHORIZATION FOR POLITICAL COMMITTEE TO USE THE ONLINE CAMPAIGN FINANCE REPORTING SYSTEM

Committee Name:		
Committee Treasurer:		
Treasurer's Phone:		
Treasurer's Mailing Address:		
Email:		
I understand that by completing this form, I am enrolled in the Campaign Finance Online Reporting System. This will enable my campaign to file reports electronically with the Secretary of State's Office. By signing this form, I hereby swear and affirm that all subsequent reports will be true and accurate, to the best of my knowledge, for all financial transactions occurring within the period covered on each financial statement. This document will serve as the oath for all electronically filed reports associated with the above listed committee.		
Signature of Tre	easurer	Date



Published by: Secretary of State's Office State Capitol Charleston, WV 25305-0770 1-866-767-8683 elections@wvsos.com www.wvsos.com File this form with **Secretary of State** if a candidate for statewide, legislative, or judicial office.

File this form with **County Clerk** if a candidate for county office.

File this form with **Municipal Clerk/Recorder** if a candidate for municipal (city of town) office.

OFFICIAL FORM F-2 PAC REVISED 9/17